

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:



CO I Miller  
Elmore Correctional Facility  
P. O. Box 8  
Elmore, AL 36025

*06/18 of camp*

2. Article Number

(Transfer from service label)

7005 1820 0002 3461 4445

PS Form 3811, February 2004

Domestic Return Receipt

595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

*[Signature]*

☐ Agent☐ Addressee

B. Received by (Printed Name)

*B. Miller*

C. Date of Delivery

*7/11/06*

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes